

Navy's Top Doctor Testifies Before Congress on Wounded Warriors

(NAVY NEWS SERVICE 22 APR 10)

By: Bureau of Medicine and Surgery

WASHINGTON -- Navy Surgeon General, Vice Adm. Adam M. Robinson Jr. testified before Congress April 22 alongside the senior medical leaders in the Department of Defense. They appeared before the House Appropriations Subcommittee on Defense.

Robinson, along with the Surgeons General of the Army and Air Force, and with Dr. Charles L. Rice who is performing the duties of the Assistant Secretary of Defense for Health Affairs, discussed the Defense Health Program budget and military healthcare programs for Wounded Warriors.

"The foundation of Navy Medicine is force health protection and nowhere is this more evident than in Iraq and Afghanistan," said Robinson in his opening statement. "The Navy Medicine team is working side-by-side with Army and Air Force medical personnel and coalition forces to deliver outstanding health care to our troops and civilians alike."

In his statement, Robinson said that he saw challenges and opportunities over the past year and that he anticipates the pace of operations and demands to continue to increase. He acknowledged that Navy Medicine is responding to meet increasing operational and humanitarian assistance requirements, as well as maintain care to a growing number of beneficiaries at home.

Care for wounded warriors dominated the hearing and Robinson emphasized that this issue was one of the Navy's top priorities. Robinson emphasized the need to focus on advancements that have the most immediate and direct impact on the warfighter, to include mental health care for those Wounded Warriors who may be suffering from operational combat stress, post-traumatic stress disorders (PTSD), or Traumatic Brain Injury (TBI).

In recent years, Navy medical research has made many significant improvements in battlefield medical care. Some recent examples of innovations include improvements to wound management, heterotopic ossification which is the process by which bone tissue forms outside of the skeleton, and diagnostic imaging of the flow of blood through specific areas of the body that have been wounded. These initiatives and others directly support Navy Medicine's top priorities.

"Research efforts targeted at wound management, including enhanced wound repair and reconstruction, as well as extremity and internal hemorrhage control, and phantom limb pain in amputees, present definitive benefits," said Robinson. "These efforts support our emerging expeditionary medical operations and aid in support to our Wounded Warriors."

Robinson told the committee members how he was working closely with his line counterparts in the Marine Corps' Wounded Warrior Regiments and the Navy's Safe Harbor program to support the full-spectrum recovery process for Sailors, Marines and their families.

"As our Wounded Warriors return from combat and begin the healing process, they deserve a seamless and comprehensive approach to their recovery," said Robinson. "We want them to

mend in body, mind and spirit. Our patient and family-centered approach brings together medical treatment providers, social workers, case managers, behavioral health providers and chaplains."

Robinson also stated that the military must prepare to offer care to wounded service members for many years to come.

"Commitment to our Wounded Warriors and their families must never waver and our programs of support and hope must be built and sustained for the long-haul - and the long-haul is the rest of this century when the young Wounded Warriors of today mature into our aging heroes in the years to come," said Robinson. "They will need our care and support as will their families for a lifetime."